

**PAYMENT BOND OF STATE HIGHWAY ENCROACHMENT PERMITTEE**

TR-0018 (REV. 11/96)

[ To Accompany the Permit ]

*Streets and Highways Code Section 677*

BOND NUMBER		PERMIT NUMBER		PRINCIPAL:	
<b>LOCATION</b>	DIST.	CO.	RT.	P.M.	EFFECTIVE DATE:
BOND NUMBER			PREMIUM AMOUNT		

(PLEASE FILL OUT FORM COMPLETELY)

**Know All Persons by These Presents:**

That \_\_\_\_\_, as **PRINCIPAL**, having an address for service of  
\_\_\_\_\_, and \_\_\_\_\_, a Surety

Company qualified and duly licensed to do business in the State of California, as **SURETY**, are held and firmly bound to the

**STATE OF CALIFORNIA**, as **OBLIGEE**, in the sum of

\_\_\_\_\_ Dollars (\$ \_\_\_\_\_ . \_\_\_\_\_),

lawful money of the United States of America, to be paid to the **OBLIGEE**, for which payment, we bind ourselves, our heirs,

executors, administrators, successors, and assigns, jointly and severally, to those persons referred to in paragraph 4 below.

**THAT THE CONDITION OF THIS OBLIGATION IS SUCH,**

1. That whereas **PRINCIPAL** has made, or is about to make, application to the State of California for a permit under Article 2 of Chapter 3 of Division 1 of the Streets and Highways Code to place, change or renew an encroachment in, under or over any portion of a state highway, and Streets and Highways Code Section 677 requires a bond payable to the State of California as a condition therefore, this payment bond is executed and tendered in accordance therewith.
2. That this bond shall be subject to all of the terms and provisions of the afore-mentioned provisions of the Streets and Highways Code.
3. That if the **PRINCIPAL** or his or its subcontractors shall fail to pay any of the persons named in Civil Code Section 3181, or amounts due under the Unemployment Insurance Code with respect to work or labor performed by such claimant, or any amounts required to be deducted, withheld, and paid over to the Franchise Tax Board from the wages of employees of the **PRINCIPAL** and his or its subcontractors pursuant to Section 18663 of the Revenue and Taxation Code, with respect to such work and labor, that the **SURETY** herein will pay for the same in an amount not exceeding the sum specified in this bond, otherwise the above obligation shall be void. In case suit is brought upon his bond, the **SURETY** will pay a reasonable attorney's fee to be fixed by the court.
4. That this bond shall insure to the benefit of any of the persons named or referred to in Civil Code Section 3181 as to give a right of action to such persons or their assigns in any suit brought upon this bond.

(SEE REVERSE SIDE)

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5. This bond to become effective on \_\_\_\_\_ .
6. That this bond shall be deemed continuous in form, remain in full force and effect, and run concurrently with the permit period and any and all renewals, or until cancellation or withdrawal of the **SURETY** from the bond. If no work has commenced under the encroachment permit, the **SURETY** may cancel this bond upon thirty (30) days written notice to the **OBLIGEE**. Bond cancellation notices shall be sent to the Department of Transportation District Office issuing the encroachment permit. The notice should include the permit number and the project's location: county, route, and postmile.
7. That the **SURETY** shall bear no liability on this bond in the event the encroachment permit issued to the **PRINCIPAL** is cancelled or withdrawn prior to commencement of work on State property by the **PRINCIPAL**.
8. This bond is executed to comply with the provisions of Chapter 3 of Division 1 of the Streets and Highways Code and of Chapter 2, Title 14, Part 2 of the Code of Civil Procedure, and said bond shall be subject to all of the terms and provisions thereof.
9. No action may be brought upon this bond more than six (6) months after acceptance by the State of California of the work performed under the encroachment permit issued to the principal.

NAME OF <b>PRINCIPAL</b>		DATE
BUSINESS ADDRESS OF <b>PRINCIPAL</b>		BUSINESS PHONE
CITY	STATE	ZIP CODE
PRINT OR TYPE NAME OF AUTHORIZED SIGNATURE AND TITLE	AUTHORIZED SIGNATURE AND TITLE	

NAME OF <b>SURETY</b> :		DATE:
BUSINESS ADDRESS OF <b>SURETY</b> :		BUSINESS PHONE
CITY:	STATE:	ZIP CODE:

*I certify (or declare) under penalty of perjury that I have executed the foregoing bond under an unrevoked power of attorney.*

*Executed on (date) \_\_\_\_\_ in (city, state) \_\_\_\_\_*

*\_\_\_\_\_ under the laws of the State of California.*

PRINT OR TYPE NAME OF ATTORNEY-IN-FACT FOR <b>SURETY</b> :	SIGNATURE OF ATTORNEY-IN-FACT FOR <b>SURETY</b> :
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